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Sider the Paperwork Reduction Act of 1995, no persons are required to respond to a collection	Docket Number (C			
ETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)  FY 2005	ELN-002			
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		2.1 002		
Application Number 10/010942-Conf. #5594	Filed December 6, 2001			
For HUMANIZED ANTIBODIES THAT RECOGNIZE BETA AMYLOI	D PEPTIDE			
Art Unit 1647	Examiner	C. J. Nichols		
This is a request under the provisions of 37 CFR 1.136(a) to extend the identified application.	period for filing a re	ply in the above		
The requested extension and fee are as follows (check time period desir	red and enter the ap	opropriate fee below):		
Fee  X One month (37 CFR 1.17(a)(1)) \$120	Small Entity Fee \$60	<u>\$</u> \$ 120.00		
	,			
Two months (37 CFR 1.17(a)(2)) \$450	\$225			
Three months (37 CFR 1.17(a)(3)) \$1020	\$510	<u> </u>		
Four months (37 CFR 1.17(a)(4)) \$1590	\$795			
Five months (37 CFR 1.17(a)(5)) \$2160	\$1080	\$		
Applicant claims small entity status. See 37 CFR 1.27.				
A check in the amount of the fee is enclosed.				
Payment by credit card. Form PTO-2038 is attached.	•			
The Director has already been authorized to charge fees in this a	application to a Dep	osit Account.		
X The Director is hereby authorized to charge any fees which may	be required, or cred	lit any overpayment, to		
	osed a duplicate cor			
I am the applicant/inventor.				
assignee of record of the entire interest. See 37 Statement under 37 CFR 3.73(b) is enclosed		n		
attorney or agent of record. Registration Number	•	·/·		
attorney or agent under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34				
The gistration number in acting under 37 CFA 1.34		•		
Signature	May	7 19, 2005		
Signature		Date		
Debra J. Milasincic Typed or printed name	(617) 227-7400 Telephone Number			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their repri	•			
than one signature is required, see below.	socializate (s) are required.	Capitit manapie forms a more		
Total of 1 forms are submitted.				
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I hereby certify that this correspondence is being deposited with the U.S. Postal Serv				

05/23/2005 NNGUYEN1 00000082 120080 10010942

Signature:

Dated: May 19, 2005

(Debra J. Mijasincic)

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31				respond to a collection of information unless it displays a valid OMB control number  Complete if Known					
Effective on 12/08/2004.  ees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Nun		10/010942-Conf. #5594				
FEE TRANSMITTAL		Filing Date		December 6, 2001					
		First Named Inventor		Guriq BASI					
For FY 2005			Examiner Name		C. J. Nichols				
Applicant claims small entity status. See 37 CFR 1.27			Art Unit 1647						
TOTAL AMOUNT OF PAY	Attorney Docket No. ELN-002								
METHOD OF PAYMEN	IT (check all th	at apply)				-			
Check Credit	Card M	oney Order	No	ne Other (	please iden	tify):			
X Deposit Account Dep	osit Account Numbe	י 12-0080 ס	eposit Acc	count Name:	La	hive & Cockfiel	d, LLP		
For the above-iden	itified deposit a	ccount, the Di	rector is	hereby authorize	ed to: (che	ck all that apply)			
	s) indicated belo	•		<u> </u>	•	dicated below, ex	cept for t	he filina fee	
	additional fee(s)		ment of		, ,				
	37 CFR 1.16 a		nent or	x Credit	any overp	ayments			
FEE CALCULATION		-							
1. BASIC FILING, SEARC	•								
		FEES	SE.	ARCH FEES Small Entity	EXAMII	NATION FEES Small Entity			
Application Type	<u>Fee (\$)</u>	Fee (\$)	Fee (\$		Fee (\$)	Fee (\$)	<u>Fees</u>	Paid (\$)	
Utility	300	150	500	250	200	100			
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FEES								Small Entity	
Fee Description							<u>Fee (\$)</u>	<u>Fee (\$)</u>	
Each claim over 20 (include	•	- D -:					50	25	
Each independent claim of Multiple dependent claims		g Reissues)					200	100	
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Total Claims Extra	Claims Fe	e (\$)	ree	Paid (\$)	_	lultiple Depende ee (\$) F	ent Claims ee Paid (	-	
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Indep. Claims Extra	a Claims Fe	ee (\$)	Fee I	Paid (\$)				_	
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3. APPLICATION SIZE FE									
If the specification and d listings under 37 CFR	1.52(e)), the a	pplication siz	e fee di	ie is \$250 (\$125				50	
sheets or fraction ther				` ′			_		
/ / \	Extra Sheets		of each a	dditional 50 or fra			<u>Fee</u>	<u>Paid (\$)</u>	
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Non-English Specificat	tion \$130 fee	(nd small ent	ity disc	ount)			rees	Paid (\$)	
Other (e.g., late filing s	١ ،	J 1			rst month	1	1:	20.00	
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SUBMITTED BY	<del>////</del> ////		-	Registration No.		<u></u>			
Signature		<u> </u>		(Attorney/Agent)	46,931	Telephone	(617) 22	27-7400	
Name (Print/Type) Debra J	. Milasincic	\				Date	May 19	), 2005	
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	<del></del>	<del>-+-</del>	-,-						
I hereby certify that this co in an envelope addressed	rrespondence is	being deposite ent. Commiss	ed with/t	he U.S. Postal Ser	vice as Exp	oress Mail, Airbill N xandria VA 2221	No. EV 418	604095 US, the date	
shown below.				1 3 5, 70. 302	, 1-00, Ale	AGIGIIG, VA 2231	5 1400, UN	and date	
Dated: May 19, 2005	Signature			$\cup$	(Dobre	r.l Milasincic)			